

Age Differences in Viral Suppression, Antiretroviral Therapy Use, and Adherence Among HIV-positive Men Who Have Sex With Men Receiving Medical Care in the United States — Medical Monitoring Project, 2009-2013

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CONFLICT OF INTEREST

 Nicholas DeGroote has no real or apparent conflicts of interest to report

BACKGROUND

- Diagnoses of HIV infection increased among men who have sex with men (MSM) from 2010 to 2014 with a 10% increase among the youngest group of MSM, those 13-24 years of age
- Viral suppression through adherence to antiretroviral therapy (ART) is essential to decrease HIV transmission and improve health outcomes
- National estimates of viral suppression and adherence among young MSM are lacking and the differences between young and older HIVpositive MSM have not been fully explored

OBJECTIVES

- To describe differences between HIV-positive MSM ages 18-24 and ages
 25 or older in care in the United States in terms of:
 - Sociodemographic characteristics
 - Prevalence of sustained viral suppression, ART use, and adherence
 - Depression, substance use, and ART beliefs
- To compare factors associated with adherence among young versus older MSM

METHODS

- Medical Monitoring Project (MMP)
 - Surveillance system that produces annual cross-sectional nationally representative estimates describing the clinical and behavioral characteristics of HIV-positive adults receiving medical care in the United States
- Data collection
 - Interviews and medical record abstractions
 - Combined data from 2009-2013 cycles of MMP
 - Response rates:
 - Facilities: 76-85%
 - Patients: 49-55%

METHODS

- Calculated weighted percentages and 95% confidence intervals among young and older MSM to estimate:
 - Sociodemographic and behavioral characteristics
 - Sustained viral suppression, ART use, and adherence
- Conducted stratified bivariate analyses to assess whether factors associated with adherence differed among young versus older MSM
 - Depression
 - Substance use
 - ART medication-related beliefs
- All analyses accounted for unequal selection probabilities and non-response

DEFINITIONS

- Sustained viral suppression
 - All HIV viral load tests in past 12 months undetectable or <200 copies/mL as documented in the medical record
- Current ART Use
 - Self-reported ART use
- Adherent
 - Reported taking 100% of ART doses, past 3 days
- Depression
 - Symptoms of major or other depression over the past 2 weeks according to criteria from the Diagnostic and Statistical Manual of Mental Disorders, 4th ed. (DSM-IV-TR)

DEFINITIONS

- Poverty
 - At or below poverty threshold as defined by the Department of Health and Human Services¹
- Binge drinking
 - - ≥5 alcoholic beverages at one sitting for men during the 30 days preceding the interview
- Stimulant use
 - Stimulant use was defined as injection or non-injection use of methamphetamines, other amphetamines, ecstasy, cocaine, or crack

¹https://aspe.hhs.gov/prior-hhs-poverty-guidelines-and-federal-register-references

Demographics Among Young and Older MSM, MMP 2009-2013

	Weighted % (95% CI)		
Demographic	18-24 (n = 361)	25+ (n = 10,487)	P-value
Race/Ethnicity			<0.0001
White, non-Hispanic	15 (10-21)	53 (48-57)	
Black, non-Hispanic	61 (53-69)	23 (19-27)	
Hispanic or Latino	18 (13-23)	19 (16-21)	
Other	5 (3-7)	5 (5-6)	
Education			<0.0001
<high school<="" td=""><td>14 (10-18)</td><td>8 (7-9)</td><td></td></high>	14 (10-18)	8 (7-9)	
High School diploma or			
equivalent	30 (24-35)	21 (19-22)	
>High School	58 (51-63)	71 (70-73)	
Poverty			<0.0001
At or below poverty level	49 (41-56)	26 (24-27)	

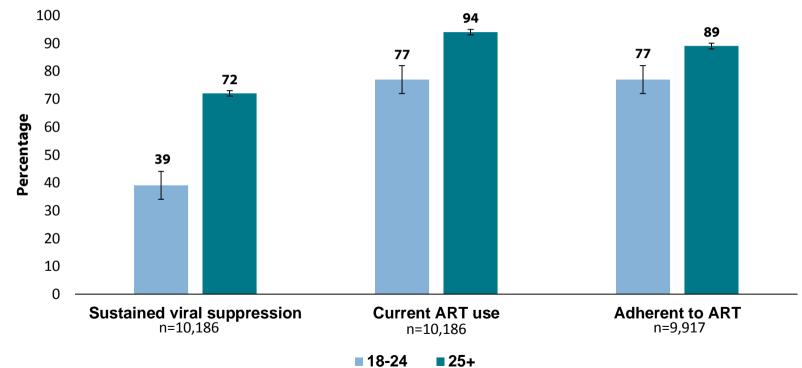
Depression and Substance Use Among Young and Older MSM, MMP 2009-2013

	Weighted % (95% CI)		
Depression and Substance Use	18-24 (n = 361)	25+ (n = 10 <i>,</i> 487)	P-value
Depression			0.16
Major depression	14 (10-18)	11 (9-11)	
Other depression	10 (6-14)	11 (10-11)	
No depression	76 (71-81)	79 (78-80)	
Binge drinking	32 (27-38)	18 (17-19)	< 0.0001
Stimulant use	12 (8-16)	12 (11-13)	0.91

ART Medication Beliefs Among Young and Older MSM, MMP 2009-2013

	Weighted % (95% CI)		
ART Medication Beliefs	18-24 (n = 361)	25+ (n = 10,487)	P-value
Bothered by ART side effects*			
About half/most/all of the time	20 (15-25)	16 (14-17)	0.04
Sure can take ART as directed			
Not at all/somewhat	8 (5-11)	5 (4-5)	0.01
Sure ART has a positive effect			
Not at all/somewhat	13 (9-18)	10 (9-11)	0.08
Sure of resistance if non-adheren	t		
Not at all/somewhat	17 (12-21)	21 (19-22)	0.13

Sustained Viral Suppression, Current ART Use, and Adherence Among Young and Older MSM, MMP 2009-2013*



*All associations: p < 0.0001

Factors Associated With ART Adherence Among Young MSM, MMP 2009-2013[‡]

	Weighted Row % (95% CI)		
Depression and Substance Use	Adherent	P-value	
Depression			
No depression	82 (77-88)	< 0.01	
Other depression	69 (55-83)		
Major depression	56 (38-74)		
Binge drinking			
Yes	75 (66-85)		
No	78 (71-84)	0.65	
Stimulant use			
Yes	79 (63-94)		
No	76 (71-82)	0.42	

ART Medication Beliefs Associated With ART Adherence Among Young MSM, MMP 2009-2013[‡]

Weighted Row % (95% CI) **ART Medication Beliefs** Adherent **P-value** Bothered by side effects, past 30 days About half/most/all of the time 63 (47-78) Never/rarely 80 (75-85) 0.01 Sure can take ART as directed Not at all/somewhat 54 (29-79) 0.01 Very sure/extremely sure 78 (73-84) Sure ART has a positive effect Not at all/somewhat 58 (38-78) 0.01 Very sure/extremely sure 79 (74-85) Sure of resistance if non-adherent Not at all/somewhat 77 (60-94) 0.93 Very sure/extremely sure 76 (70-83)

[‡]Limited to those currently on ART

Factors Associated With ART Adherence Among Older MSM, MMP 2009-2013[‡]

	Weighted Row % (95% CI)		
Depression and Substance Use	Adherent	P-value	
Depression			
No depression	90 (89-91)	<.0001	
Other depression	84 (82-87)		
Major depression	80 (78-83)		
Binge drinking			
Yes	84 (82-86)		
No	90 (89-90)	<.0001	
Stimulant use			
Yes	76 (72-79)		
No	90 (89-91)	<.0001	

ART Medication Beliefs Associated With ART Adherence Among Older MSM, MMP 2009-2013[‡]

Weighted Row % (95% CI)

ART Medication Beliefs	Adherent	P-value
Bothered by side effects, past 30 days		
About half/most/all of the time	84 (81-86)	
Never/rarely	89 (88-90)	<.0001
Sure can take ART as directed		
Not at all/somewhat	56 (50-61)	<.0001
Very sure/extremely sure	90 (89-91)	
Sure ART has a positive effect		
Not at all/somewhat	81 (78-84)	<.0001
Very sure/extremely sure	89 (88-90)	
Sure of resistance if non-adherent		
Not at all/somewhat	77 (60-94)	<.0001
Very sure/extremely sure	76 (70-83)	
[‡] Limited to those currently on ART		

Summary of Factors Associated With Non-adherence Among Young and Older MSM, MMP 2009-2013

	Associated With Non-adherence	
Factors	18-24	25+
Depression	X	X
Binge drinking		X
Stimulant use		X
Bothered by ART side effects	X	X
Unsure can take ART as directed	X	X
Unsure ART has a positive effect	X	X
Unsure of resistance if non-adherent		X

DISCUSSION

- Compared to older MSM, young HIV-positive MSM had significantly lower prevalence of:
 - Viral suppression (39% vs. 72%)
 - ART use (77% vs 94%)
 - Adherence (77% vs. 89%)
- Associations with adherence
 - Depression, experiencing side-effects of ART, not taking ART as directed, and being unsure of ART's positive effects were associated with non-adherence among all MSM
 - No significant associations between binge drinking, stimulant use, being unsure of resistance from non-adherence to ART, and adherence among young MSM

DISCUSSION

- Young HIV-positive MSM are more socioeconomically challenged compared to older MSM, which can create barriers to optimal healthcare
- Many interventions exist to improve adherence in adults, yet few rigorously evaluated tailored interventions have been developed to improve adherence among young persons
- Young MSM with depression reported poor adherence and thus addressing mental health may be important
- Providers may need to ask about and address ART side effects that their patients may experience to improve adherence among young MSM

LIMITATIONS

- Results are not generalizable to HIV-positive MSM that are not receiving medical care or are undiagnosed
- Cross-sectional analysis, causality cannot be assessed
- Small sample for young MSM, may have lacked power to detect other differences
- Not every possible factor was assessed for an association with adherence

CONCLUSION

- The significantly lower prevalence of sustained viral suppression, ART use, and adherence among HIV-positive young MSM supports the continued need to improve the last steps in the HIV care continuum among this group
- This analysis found several behavioral and attitudinal differences between young and older MSM, as well as differences in factors associated with adherence among the groups, which suggests that tailored adherence interventions may be beneficial for HIV-positive young MSM

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For more information, contact CDC 1-800-CDC-INFO (232-4636) TTY: 1-888-232-6348 www.cdc.gov

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